NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

ESTIMATED PROPRIETORSHIP BUSINESS TAX QUARTERLY PAYMENT FORMS

2003 Estimated Tax Worksheet (Keep for your records - Do not file)

1 ESTIMATED TA		X BASE AND/OR GROSS BUSINESS PROFITS		BET(a)		BPT(b)				
	a BET Taxable Base after Apportionment									
	b NH Taxab	ole Business Profits after Apportionn	nent							
2	TAX				P.					
	a Line 1(a) x .0075b Line 1(b) x .085									
3	CREDITS									
	a RSA 162-L, CDFA (Investment Tax Credit)									
	b RSA 77-A:5 (Please be sure to include the BET Credit)									
4	Estimated tax fo	or current year [Line 2 minus Line 3(a) and/or 3(b)]							
5	Overpayment fr	om last year								
6	Balance of Busi	iness Taxes Due (Line 4 minus Line	5)							
		COMPL	JTATION and RECO	ORD of PAYME	NTS					
		Amount of e		Total Due		DAR YEAR				
_	Date Paid	BET (1/4 of L	ne 6 above) BF	PT	(BET and/or B	BPT) DUE	DATES			
1		\$	\$		\$	April	15, 2003			
2.		\$	\$		\$	June	16, 2003			
3.		\$	\$		\$	Sept	. 15, 2003			
4.		\$	\$	\$		Dec	. 15, 2003			
Т	HE PENALTY	Line 1 Enter ¼ of the Business Line 2 Enter ¼ of the Business Line 3 Enter the TOTAL payme PROVISIONS OF RSA 21-J:32	s Profits Tax Calculated ent sum of Lines 1 and 2 IMPORTAN	I in the tax works 2. T:	heet above.		EEN MET			
_			(Cut along this line)							
Fo	FORM NH-1040-E 732 r the CALENDAR		eginning	SINESS TAX - 2	2003	FOR DRA USE (DNLY			
	ſ	PLEASE PRINT OR TYPE LAST NAME	Mo Day Ye		Mo Day Year CURITY NUMBER (Prop	prietor)				
		SPOUSE'S LAST NAME	FIRST NAME & INITIAL		SOCIAL SECURITY NUMBER (Spouse)					
F	FOR DRA USE ONLY NUMBER AND STREET ADDRESS				DEPARTMENT IDENTIFICATION NUMBER					
		ADDRESS (continued)								
	CITY/TOWN, STATE & ZIP CODE				1/4 Business Enterprise Tax 1 \$					
	-			1/4 Busines	ss Profits Tax 2	\$				
	NH DEPT OF REVENUE ADMINISTRATION MAIL DOCUMENT PROCESSING DIVISION				This Payment 3					
	TO: PO BOX 637 CONCORD NH 03302-0637 Make checks payable to: STATE OF NEW HAMPSHIRE. Enclose, but do not staple or tape, your payment with this estimate. Do not file a \$0 estimate. NH-1040-Rev. 10/									

FORM NH-1040-ES

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

ESTIMATED PROPRIETORSHIP BUSINESS TAX - 2003

732

or the Calenda	R year 2003 or other taxable period beg	Mo Da		ınd ending Mo Day Year	-		
	PLEASE PRINT OR TYPE LAST NAME	FIRST NAME & INI		SOCIAL SECURITY NUMBER (Pro	anriator)		
	LAST NAME	FIRST NAME & INI	ITIAL	SOCIAL SECORITY NUMBER (FI	oprietor)		
FOR DRA USE ONLY	SPOUSE'S LAST NAME	FIRST NAME & INITIAL		SOCIAL SECURITY NUMBER (Spouse)			
01121111002 01121	NUMBER AND STREET ADDRESS		DEPARTMENT IDENTIFICATION NUMBER				
	ADDRESS (continued)			1/5			
	CITY/TOWN, STATE & ZIP CODE			1/4 Business Enterprise Tax	1 \$		
				1/4 Business Profits Tax	2 \$		
	CONCORD NH 03302-0637 Enc			Amount of This Payment	3 \$		
			Enclose.	checks payable to: STATE OF NEW HAMPSHIRE. bse, but do not staple or tape, your payment this estimate. Do not file a \$0 estimate. NH-104 Rev. 10			
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NH-1040-E							
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	SPOUSE'S LAST NAME	FIDOT NAME & INITIAL		SOCIAL SECUDITY NI IMPED (Spouse)			
OR DRA USE ONLY		FIRST NAME & INITIAL		SOCIAL SECURITY NUMBER (Spouse)			
	NUMBER AND STREET ADDRESS ADDRESS (continued)			DEPARTMENT IDENTIFICATION	NUMBER		
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	CITY/TOWN, STATE & ZIP CODE	Y/TOWN, STATE & ZIP CODE		1/4 Business Enterprise Tax	1 \$	-	
				1/4 Business Profits Tax	2 \$		
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